

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10 561,075

FILING DATE

12-19-05

APPLICANT(S)

2/13/06

CLAIMS

*after
article 19*

	AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.
1	1		1	
2		1		1
3	1		1	
4		1	1	
5	1		1	
6	1		1	
7	1		1	
8	1		1	
9	1		1	
10	1		1	
11	e			
12	1		1	
13	1		1	
14	1		1	
15	1		1	
16	1		1	
17	1		1	
18	1		1	
19	1		1	
20	1		1	
21	1		1	
22	1		1	
23	1		1	
24	1		1	
25	1		1	
26	e	c		
27	e	c		
28	e	c		
29	1		1	
30	1		1	
31	1		1	
32	1		1	
33	1		1	
34	1		1	
35	1		1	
36	1		1	
37	1		1	
38	1		1	
39	e	e		
40				
41				
42				
43				
44				
45				
46	e	c		
47				
48				
49				
50				
TOTAL IND.	5	↓	5	↓
TOTAL DEP.	29	←	29	←
TOTAL CLAIMS	34		34	

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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97						
98						
99						
100						
TOTAL IND.					↓	
TOTAL DEP.					←	←
TOTAL CLAIMS					←	←